

**STAVIS SEAFOODS, INC.**  
**7 CHANNEL STREET**  
**BOSTON, MA 02210**

**Contractor Evaluation Form**

1. List the percentage of your business on ammonia refrigeration in the last 2 years: \_\_\_\_\_%
2. Provide us with the names and telephone numbers of at least three references for related ammonia refrigeration projects completed in the past 5 years.
3. Are your employees trained on the potential hazards associated with ammonia and on general ammonia refrigeration principals?  
\_\_\_\_\_ Yes \_\_\_\_\_ No
4. Do you have a safety and health training program that meets Occupational Safety and Health Administration (OSHA) requirements (29 CFR 1926.21(b))  
\_\_\_\_\_ Yes \_\_\_\_\_ No
5. Provide us with certificates of insurance for each of the following (as applicable):
  - a. Workers Compensation and Employers' Liability
  - b. Commercial General Liability
  - c. Automobile Liability
  - d. Pollution Liability
6. Provide us with your OSHA Recordable Injury Rate and/or your Experience Modification Rating (EMR):  
\_\_\_\_\_ OSHA Recordable Injury Rate  
\_\_\_\_\_ **Experience Modification Rating (EMR)**
7. Have you experienced hospitalization of three or more employees or any construction fatalities within the past 3 years? If yes, attach a full discussion of causes and results.  
\_\_\_\_\_ Yes \_\_\_\_\_ No
8. Have you received any OSHA citations within the past 3 years? If yes, attach a full discussion of events and results.  
\_\_\_\_\_ Yes \_\_\_\_\_ No
9. Provide documentation that your employees are certified welders (if applicable).

I \_\_\_\_\_, representing \_\_\_\_\_  
by signing below certify that to the best of my knowledge the above information is correct and up to date.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_